

## California Medical Waste Management Program HOME GENERATED SHARPS CONSOLIDATION APPLICATION

Home-generated sharps consolidation	on point and trans	sporter information:
Consolidation Point		Transporter
Est./Facility name		Name
Contact person		Contact person
Address		Address
Telephone ( )		Telephone ( )
Pick-up frequency*		Registration number
document will serve as a request the Department approval of this application. For more information, the Medica Section 117600, et seq. is available the operational requirements for Ho 118147.	at the Department on is your authorical Waste Manage on the DHS webstare. Generated Since generator, the facility to accept	gement Act (California Health and Safety Code by site at http://www.dhs.ca.gov/medicalwaste) states Sharps Consolidation Points in Sections 117904 and e Medical Waste Management Act, Section 118147
Upon completion mail this form to:		
California Department of Health Services Medical Waste Management Program, MS 7405 P.O. Box 997413 Sacramento, CA 95899-7413		
For more information visit the Departme	ent of Health Servi	vices web site at http://www.dhs.ca.gov/medicalwaste.
FOR DEPARTMENT USE ONLY		
Reviewed by	Date	☐ Approved ☐ Not approved
		Reason: